

SUBMIT: COMPLETED APPLICATION, TAX  
STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN  
DATE RECEIVED  
MAY 08 2015  
Bayfield Co. Zoning Dept.

ENTERED  
Permit #: 15-0158  
Date: 5-27-15  
Amount Paid: \$75  
Refund: 5-27-15

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: <u>Thomas Joyce SUTAK</u>	Mailing Address: <u>30600 Nelander Rd</u>	City/State/Zip: <u>Washburn, Wisc</u>	Telephone: <u>715-373-2852</u>
Address of Property: <u>30600 Nelander Rd.</u>		City/State/Zip: <u>Washburn Wisc</u>	Cell Phone: <u>904-613-5019</u>
Contractor: <u>David Oreskovich JR.</u>	Contractor Phone: <u>Plumber: No Plumbing</u>	Plumber: <u>No Plumbing</u>	Plumber Phone: <u>Plumber</u>
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone: <u>Agent Mailing Address (include City/State/Zip):</u>	Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PROJECT LOCATION: <u>SW 1/4, SE 1/4</u>	Legal Description: (Use Tax Statement)	PIN: (23 digits) <u>04-002-2-48-05-13-9 03-002200</u>	Recorded Document: (i.e. Property Ownership) Volume <u>927</u> Page(s) <u>817</u>
Section <u>S13</u> , Township <u>48</u> N, Range <u>05</u> W	Town of: <u>Barkdale</u>	Lot Size	Acreage <u>20 acres</u>
<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (and intermittent) Creek or Landward side of Floodplain? If Yes--Continue →	Distance Structure is from Shoreline: <u>650</u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Non Shoreland	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes--Continue →	Distance Structure is from Shoreline: <u>      </u> feet	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$ <u>8,000.</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input checked="" type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Holding</u>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input checked="" type="checkbox"/> Foundation	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>30 FT</u>	Width: <u>18 FT</u>	Height: <u>14 FT</u>
Proposed Construction:	Length: <u>30 FT</u>	Width: <u>18 FT</u>	Height: <u>14 FT</u>

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	( )	( )	( )
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( )	( )	( )
<input type="checkbox"/> with Loft	( )	( )	( )
<input type="checkbox"/> with a Porch	( )	( )	( )
<input type="checkbox"/> with (2 <sup>nd</sup> ) Porch	( )	( )	( )
<input type="checkbox"/> with a Deck	( )	( )	( )
<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	( )	( )	( )
<input type="checkbox"/> with Attached Garage	( )	( )	( )
<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities	( )	( )	( )
<input type="checkbox"/> Mobile Home (manufactured date) _____	( )	( )	( )
<input type="checkbox"/> Addition/Alteration (specify) _____	( )	( )	( )
<input type="checkbox"/> Accessory Building (specify) <u>STORAGE BUILDING</u>	( )	( )	<u>540 sq. ft</u>
<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	( )	( )	<u>30 X 18</u>
Rec'd for Issuance	Special Use: (explain) _____	( )	( )
MAY 27 2015	Conditional Use: (explain) _____	( )	( )
	Other: (explain) _____	( )	( )

Section 19.01(1) FAILURE TO OBTAIN A PERMIT AT STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
(fee) determine this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Thomas Joyce SUTAK  
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: \_\_\_\_\_ Date 5-8-15

(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
Address to send permit 30600 Nelander Rd. Washburn, Wisc 54891

Copy of Tax Statement  
If you recently purchased the property send your Recorded Deed

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**  
(2) Show / Indicate: North (N) on Plot Plan  
(3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)  
(4) Show: All Existing Structures on your Property  
(5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)  
(6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond  
(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See attached

Please complete (1) – (7) above (prior to continuing)

- (8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	290 Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	80 Feet	Setback from the Bank or Bluff	650 Feet
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	250 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	380 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	60 Feet	Setback to Well	NO Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: 06-1015	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial:				
Permit #: 15-0158	Permit Date: 5-27-15				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lots) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:		
Was Parcel Legally Created Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Inspection Record: inspection 5-21. Slab just poured. Contractor on site to relevel project + property lines.	Inspected by:	Zoning District: ( )	Lakes Classification: ( )		
Date of Inspection: 5-21-15	Inspected by:	Date of Re-Inspection:			
Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.) Building shall not be used for sleeping purposes or human habitation. Building shall not contain indoor plumbing fixtures w/ connection to sewerized water unless approved convention to parts is approved.					
Signature of Inspector:				Date of Approval: 5-22-15	
Hold For Sanitary: <input type="checkbox"/>	Hold For T&A: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>	







- (1) Show Location of: Proposed Construction  
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 (5) Show: (\* ) Well (W); (\* ) Septic Tank (ST); (\* ) Drain Field (DF); (\* ) Holding Tank (HT) and/or (\* ) Privy (P)  
 (6) Show any (\*): (\* ) Lake; (\* ) River; (\* ) Stream/Creek; or (\* ) Pond  
 (7) Show any (\*): (\* ) Wetlands; or (\* ) Slopes over 20%

See  
Attachment

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	612 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	546 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	311 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	602 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		Feet
Setback to Privy (Portable, Composting)	50 Yards Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

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NOTICE: All land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

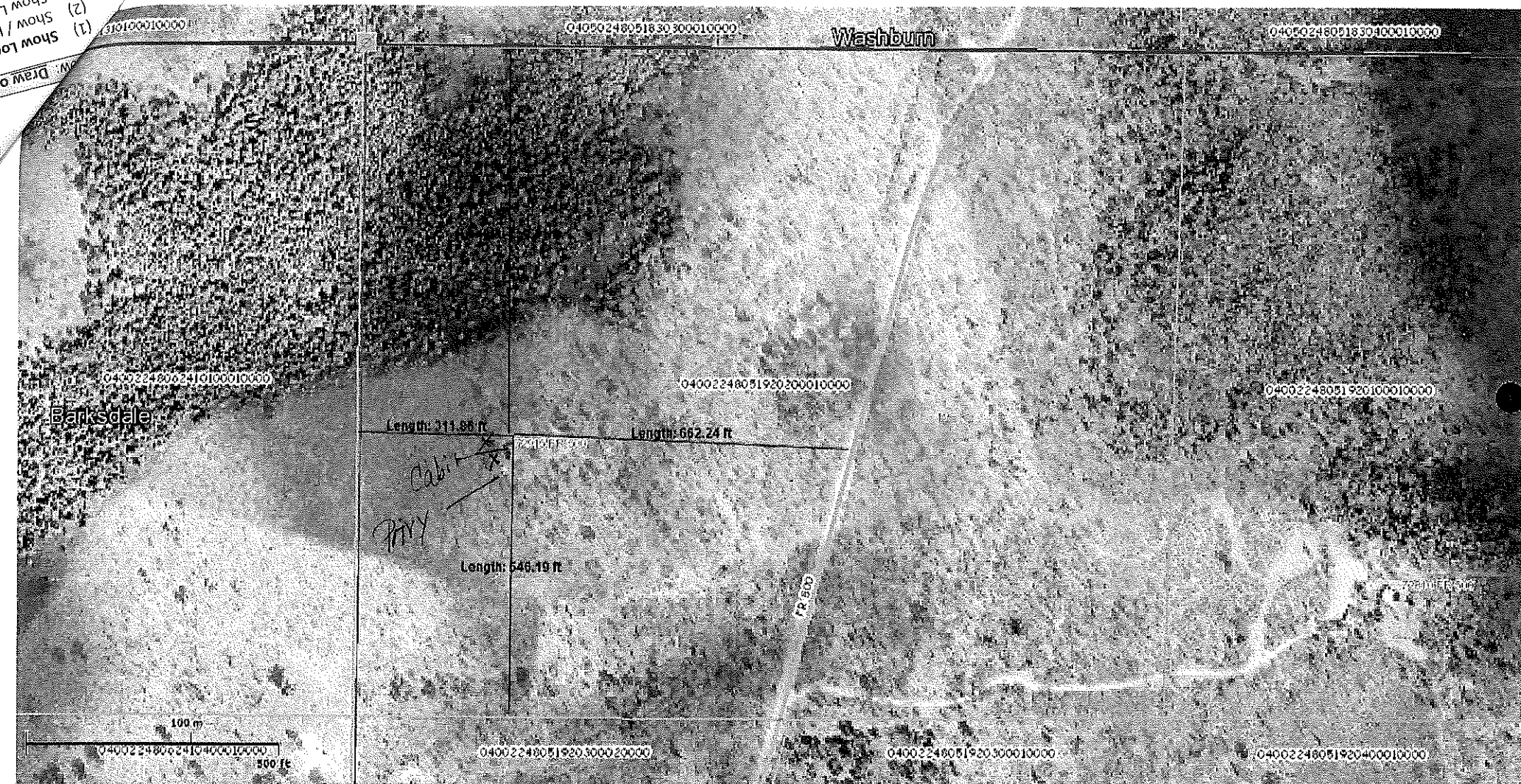
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of Bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 15-0158	Permit Date: 15-08-15			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous lots)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted Variance (B.O.A.)	Case #:	Previously Granted by Variance (B.O.A.)	Case #:	
Was Parcel Legally Created	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	We're Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Inspection Record: site cleared by BIR.				
Date of Inspection: 5-27-15	Inspected by: J. Greenlee Murphy	Zoning District: (F-1)	Lakes Classification: (N/A)	Date of Re-Inspection:
Conditions: Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached)		BUILDING SITE NOT BE USED FOR HUMAN HABITATION + SITE NOT BE SEVERED BY PRESSURIZED WATER.		
Signature of Inspector: [Signature]		Date of Approval: 5-27-15		
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Show Low (1)  
Show / (2)  
Show L (3)  
Show (4)  
Show (5)  
Show (9)  
Show (7)

# Old County, WI



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x means little sheds!